

DAVID P. GORDON
ADMITTED IN CT AND NY

DAVID S. JACOBSON
ADMITTED IN NY AND NJ

JAY P. SBROLLINI
ADMITTED IN NY, MA AND DC

OF COUNSEL:
THOMAS A. GALLAGHER
ADMITTED IN NY AND NJ

GORDON & JACOBSON, P.C.

INTELLECTUAL PROPERTY LAW

65 WOODS END ROAD
STAMFORD, CT 06905
TEL: 203-329-1160
FAX: 203-329-1180

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Subject: Verification of Attorney Information

Comments: Attached please find Verification of Attorney Information documents for 2 / separate patent applications. Please forward them to the appropriate offices. Thank you for your prompt attention to this matter.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Sundaram Ravikumar et al.

Group Art Unit: 3731

Serial No.: 10/734,393

Examiner:

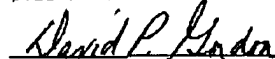
Filed: December 12, 2003

Attorney Docket: RAV-011

Title: Suturing Device

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I hereby certify that this correspondence is being facsimile transmitted on this day to fax number (703) 822-8300 to the Commissioner of Patents and Trademarks.



David P. Gordon
Reg. No. 29,996

May 28, 2004
Date

Honorable Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

REQUEST VERIFICATION OF ATTORNEY INFORMATION

This is to hereby request that the attorney information be verified such that the attorneys listed in the PALM System match the attorneys named on the declaration, and correspond to our customer number, 36822. This will ensure that all future correspondence will be forwarded to the correct address and allow the appointed attorneys access to the private PAIR System.

Respectfully submitted,



David P. Gordon
Reg. #29,996
Attorney for Applicant(s)

Gordon & Jacobson, P.C.
65 Woods End Road
Stamford, CT 06905
(203) 329-1160